

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>in G</i>		<i>2/29/99</i>
O.I.P.E. CLASSIFIER	<i>EUN</i>	<i>11</i>	<i>11/10/2001</i>
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	<i>S.S.</i>	<i>69134</i>	<i>1-18-00</i>

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 +- Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	10/26/02
2	✓	✓	10/26/02
3	✓	✓	10/26/02
4	✓	✓	10/26/02
5	✓	✓	10/26/02
6	✓	✓	10/26/02
7	✓	✓	10/26/02
8	✓	✓	10/26/02
9	✓	✓	10/26/02
10	✓	✓	10/26/02
11	✓	✓	10/26/02
12	✓	✓	10/26/02
13	✓	✓	10/26/02
14	✓	✓	10/26/02
15	✓	✓	10/26/02
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47	✓	✓	10/26/02
48	✓	✓	10/26/02
49	✓	✓	10/26/02
50	✓	✓	10/26/02

Claim	Final	Original	Date
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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